MANUFACTURER INFORMATION

Manufacturer's N Fröling Heizkessel u	ame: Ind Behälterbau Ges.m.b.	н.							
Manufacturer's Physical Address: Industriestrasse 12 4710 Grieskirchen Austria			Manufacturer's Mailing Address (if different from physical address):						
	f Manufacturer's Respo r, Export Sales Manager	onsible/Authori	zed Representativ	e Submitting thi	is App	olication:			
Manufacturer's C w.emhofer@froeling			Manufacturer's Phone Number: +43 7248 606 0						
Manufacturer's W www.froeling.com	/ebsite Address:		Manufacturer's Website Address where the test report and owner's manual will be posted, if known:						
AFFECTED WOOD HEATER MODEL INFORMATION									
Model Name(s) (as appearing on the certification test report). Please note: the model name and design number must clearly distinguish one model from another. The name and design number cannot include the EPA symbol or logo or name or derivatives such as "EPA": Froling S3 Turbo 30									
Model Number(s) (as appearing on the certification test report, if applicable): Froling S3 Turbo 30									
Heater Type Check one):	□Adjustable Burn Rate Wood Heater	□Pellet Stove	□Single Burn Rate Heater	⊠ Hydronic Heater	□Fc	orced Air Furnace			
Hydronic Heater Type (Check one):	□Full Storage	⊠Partial Storage	□No External Storage	⊠Indoor	□Oι	utdoor			
Forced-Air Furnace Type (Check one):	□Small (less than 65,000 BTU/hr heat output)		□Large (greater than 65,000 BTU/hr heat output)						
Fuel Tested (Check one):	□Crib	□Pellet	⊠Cordwood	□Wood Chips		□Other:			
Certification Step:	□2015	□2016 (FAFs only)	□2017 (FAFs only)	⊠2020 (ALL HEATERS)					
Equipped with a c	catalytic combustor?	□Yes ⊠No							
EPA-APPROVED TEST LABORATORY									
Name of EPA-Approved Test Laboratory: OMNI-Test Laboratories, Inc.									
Name(s) of Person(s) Authorized and/or Responsible for Conducting Certification Test: Bruce Davis									
Phone: (503) 643-3788		E-mail: bdavis@omni-test.com		Fax:					
City: Portland		State: Oregon		ZIP Code: 97230					
EPA-APPROVED THIRD-PARTY CERTIFIER									

Name of EPA-Approved Third-Party Certifier: OMNI-Test Laboratories, Inc.								
Name(s) of Person(s) Authorized and/or Responsible for Reviewing Test Report and/or Issuing Certification of Conformity: Alex Tiegs								
Phone: (503) 643-3788	E-mail: atiegs@omni-test.com		Fax:					
City: Portland	State: Oregon		ZIP Code: 97230					
COMPLIANCE TEST INFORMATION								
Test Method(s): EPA Method 28 WHH-PTS, ASTM E2515-11								
Date(s) of Proposed Test: December 16, 2021								
Testing Location (Name and Address): OMNI-Test Laboratories / 13327 NE Airport Way / Portland, OR 97230								
Technician's Contact Name: Bruce Davis		Title: Testing Manager						
Phone Number: (503) 643 - 3788		Email Address: bdavis@omni-test.com						
Print Name and Title of Authorized Office Signature								
November 16, 2021								
Date								
Telephone Number: +43 7248 606 0								
Email Address: w.emhofer@froeling.com								
Remarks:								
This is an amendment to the 30 day notice sent on August 23, 2021 and to the 30day notice sent on September 24, 2021. Reason: date change.								
v1								